

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

137	5276
OM	B APPROVAL
	m <u>ber: 3235-0076</u>
Exp res:	April 30,2008
Estima	100
hours	
Pref	
	07043888

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Global Recycling Technologies, Ltd.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 4617 E. Ardmore, Phoenix, Arizona 85044	Telephone Number (Including Area Code) 917-334-1234
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
ethylene glycol recycling Type of Business Organization	PROCESSED
business trust limited partnership, to be formed	please specify): FEB 1 6 2007
Month Year Actual or Estimated Date of Incorporation or Organization: 05 06 Actual Estin Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. Anotice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Admin strator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

M

	j.	A. BASIC IDENTI	FICATION DATA			
2. Enter the information requested	for the following:				·	
 Each promoter of the issue 	, if the issuer has bee	n organized within	the past five years;			
 Each beneficial owner having 	ng the power to vote or	dispose, or direct th	e vote or disposition	of, 10% or more	of a cla	ss of equity securities of the issuer
 Each executive officer and 	director of corporate	issuers and of corpo	rate general and man	aging partners	of partn	ership issuers; and
 Each general and managing 	partner of partnershi	p issuers.				
Check Box(es) that Apply: P	omoter 📝 Bene	ficial Owner	Executive Officer	Director		General and/or Managing Partner
 Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or						
	-	, State, Zip Code)			,	
Check Box(es) that Apply: Po	omoter Bene	ficial Owner	Executive Officer	Director		
Full Name (Last name first, if individ	ual)				,	
Business or Residence Address (Nu	mber and Street, City	, State, Zip Code)				
Check Box(es) that Apply: Pr	omoter Bene	ficial Owner	Executive Officer	Director		
Full Name (Last name first, if individ	ual)					
Business of Residence Address (Nu	mber and Street, City,	, State, Zip Code)			·	
Check Box(es) that Apply: Pr	omoter Bene	ficial Owner	Executive Officer	Director		
Full Name (Last name first, if individ	ual)					
Business or Residence Address (Nu	mber and Street, City,	, State, Zip Code)				
Check Box(es) that Apply: Pr	omoter Bene	ficial Owner	Executive Officer	Director		
Full Name (Last name first, if individ	ual)					
Business or Residence Address (Nu	mber and Street, City,	State, Zip Code)				
Check Box(es) that Apply: Pr	omoter Benef	ficial Owner	Executive Officer	Director		
Full Name (Last name first, if individ	ual)					
Business or Residence Address (Nu	mber and Street, City,	State, Zip Code)			*·b	
Check Box(es) that Apply: Pr	omoter Benef	ficial Owner	Executive Officer	Director		
Full Name (Last name first, if individ	ual)					
Business or Residence Address (Nu	mber and Street, City,	State, Zip Code)				
	(Use blank sheet, or	copy and use additi	onal copies of this sh	cet, as necessa	ry)	

•												
	<u> </u>			В. Г	NFORMAT	ION ABOU	T OFFERI	NG				
1 Has the	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?											
7. 7145 11.	1,5,001 501	u, or uocs i							_		Ľ	
2. What i	s the minin	num investr			• •		_				\$	
						,					Yes	No
3. Does th	he offering	permit join	it ownershi	p of a sing	le unit?				••••••		R	
commi If a per or state a broke	ssion or sin son to be lists, list the n er or dealer	nilar remune sted is an as ame of the b . you may s	cration for s sociated pe proker or de set forth th	solicitation erson or age caler. If me	of purchase ent of a brok ore than five	ers in conn ker or deale e (5) perso:	ection with or registered ns to be list	sales of sed with the S ded are asso	curities in t SEC and/or	he affering. with a state		
3. Does the offering permit joint ownership of a single unit?												
Business or	Residence	Address (N	Number and	d Street, C	ity, State, 2	(ip Code)						
Name of As	sociated B	roker or De	aler									
(Check	"All State	s" or check	individual	States)							☐ AI	I States
										==	=	
Full Name (Last name	first, if ind	ividual)									
Business o	r Residence	: Address (Number an	d Street, C	ity, State,	Zip Code)			·· ·····			
Name of As	sociated B	roker or De	aler									
States in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Check	"All State	s" or check	individual	States)	***************************************			***************************************			□ Ai	I States
AT	[XV]	- ر <u>ج</u> ات	AD	दिंद्री	ंटिका	[CT]	[DE]	וחכו	(C)	GA	_ []	(TK)
RI	SC	SD	TN	TX	UT	VT	VA	WA	\overline{WV}	WI	WY	PR
Full Name (Last name	first, if ind	ividual)									
					·		- 					-
Business of	Residence	: Address (1	Number an	d Street, C	ity, State, I	Zip Code)						
Name of As	sociated B	roker or De	aler	<u> </u>	 . –	····					····	~~~~
States in W	hich Person	Listed Hav	s Solicited	or Intends	to Solicit	Purchasers						
								•••••		••••	☐ All	States
AL	AK	ĀZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC]	ND	OH	OK)	OR	PA
RĬ	SC	SD	TN	TX	UT	[VT]	VA	WA	WV	Wi	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and			
	already exchanged.			
	Type of Security	Aggregate Offering Price	<u>;</u>	Amount Already Sold
	Debt	5	_	\$
	Equity	600,000.00	_	\$_85,000.00
	✓ Common Preferred			
	Convertible Securities (including warrants)	S	_	\$
	Partnership Interests	S		\$
	Other (Specify)			\$
	Total	600,030.00		\$ 85,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.			-
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number		Aggregate Dollar Amount
		Investors		of Purchases
	Accredited Investors	6	_	\$_85,000.00
	Non-accredited Investors			\$
	Total (for filings under Rule 504 only)		_	\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505			\$
	Regulation A		_	\$
	Rule 504		_	\$
	Total		_	<u>\$_0.00</u>
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	[\$
	Printing and Engraving Costs		Z	\$_1,000.00
	Legal Fees		Z	S 6,500.00
	Accounting Fees	-	_ Z	\$ 5,000.00
	Engineering Fees	-	_	s
	Sales Commissions (specify finders' fees separately)		_ ¬	\$
	Other Expenses (identify)		_ 71	§ 2,500.00
	Total	_	_ 7	\$ 15,000.00

		one de la companya d La companya de la co		
ar	d total expenses furnished in response to Part C -	ing price given in response to Part C — Question I Question 4.a. This difference is the "adjusted gross		\$585,000.00
ci ci	ch of the purposes shown. If the amount for an	record to the issuer used or proposed to be used for my purpose is not known, furnish an estimate and fifthe payments listed must equal the adjusted gross t.C.—Question 4.b above.		
			Payments to Officers, Directors, & Affiliates	Payments to Others
P	irchase of real estate			
	rchase, rental or leasing and installation of mac	chinery []	¬\$	□\$
		ilities		
A	quisition of other businesses (including the val fering that may be used in exclunge for the asse	ne of securities involved in this	_	_
			-	_
_	·-·			
c	olumn Totals	\$18\$61.11777178-777777777771111111111111111	Z \$ 100,000.00	y \$ 485,000.00
T	otal Payments Listed (column totals added)		∠ \$_ ⁵⁸	15,000.00
signati	re constitutes un undertaking by the issuer to fur	undersigned duly authorized person. If this notice mish to the ALS, Securities and Exchange Commistredited investor pursuant to paragraph (b)(2) of R	sjon, upon writte	le 505, the followin n request of its stuf
lasuer	(Print or Type)		Date /	/8
Globa	Recycling Technologies, Ltd.	X/XV/V/V/V	2/1	1/07
	of Signer (Print or Type) Are Lorenz	Title-of Signer (Frint or Type) Chairman and Chief Executive Officer		,

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

# 308		
1,		262 presently subject to any of the disqualification Yes No
		See Appendix, Column 5, for state response.
2.	The underxigned issuer hereby undertake D (17 CFR 239.500) at such times as r	ces to furnish to any state administrator of any state in which this notice is filed a notice on Form required by state law.
3.	The undersigned issuer hereby undertalissuer to offerees,	ikes to furnish to the state administrators, upon written request, information furnished by the
4.	limited Offering Exemption (ULOE) of	the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform fithe state in which this notice is filed and understands that the issuer claiming the availability tablishing that these conditions have been satisfied.
	er has read this notification and knows the horized person.	contents to be true and has duly caused this notice to be signed on its behalf by the undersigned
Issuer (rint or Type) .	Signature Date
Global I	Recycling Technologies, Ltd.	18/3/ m (MILEN 21/10/
Name (1	rint or Type)	Title (Print of Type)
John q	Arc Lorenz	Chairman and Chief Executive Officer

Print the name and title of the signing representative under his signature for the state purtion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or hear typed or printed signatures.

5 2 3 4 Disqualification Type of security under State ULOE and aggregate (if yes, attach Intend to sell explanation of Type of investor and to non-accredited offering price offered in state amount purchased in State waiver granted) investors in State (Part C-Item 2) (Part E-Item 1) (Part C-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited Investors **Investors** Amount Yes No State Yes No Amount ALΑK ΑZ AR $\mathsf{C}\mathsf{A}$ CO \$600,000 Common × CT× \$45,000.00 DE DC FL GA н ID ΙL IN IA KS KY LA ME MDMA \$600,000 Common × ΜI MN MS

APPENDIX

APPENDIX 1 2 3 4 Disqualification under State ULOE Type of security (if yes, attach and aggregate Intend to sell offering price Type of investor and explanation of to non-accredited offered in state amount purchased in State waiver granted) investors in State (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Non-Accredited Accredited State Yes No Investors Amount **Investors** Amount Yes No MO MT NE NVNH NJ NM NY NC ND ОН OK OR PA \$600,000 Common X 3 \$45,000.00 RΙ SC SD TNTXUT VTVA \$600,000 \$10,000.00 × WA × Common Stock WVWI

				APP	ENDIX				
1		2	3			4	,	5 Disqual	lification
	Intend to sell and aggregate offering price investors in State (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1)		and aggregate offering price			investor and rchased in State		under Sta (if yes, explan	ate ULOE attach ation of granted)
			(Part C-Item 2)			(Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No

WY

PR